



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
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HAWAII STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Horiuchi Bell	Anne	T.	808-547-5600
MAILING ADDRESS (Street)			FAX
1099 Alakea Street, Suite 1800			808-547-5880
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Goodsill Anderson Quinn & Stifel			808-547-5600
MAILING ADDRESS (Street)			FAX
Same as above.			808-547-5880
(City)	(State)	(Zip Code)	

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
MultiState Associates on behalf of U.S. Smokeless Tobacco Co.		703-684-1110
MAILING ADDRESS (Street)		FAX
515 King Street, Suite 300		703-684-7912
(City)	(State)	(Zip Code)
Alexandria, VA 22314		
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
Carrie E. Calvin		703-684-1110
MAILING ADDRESS (Street)		FAX
515 King Street, Suite 300		703-684-0717
(City)	(State)	(Zip Code)
Alexandria, VA 22314		

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input checked="" type="checkbox"/> Health | <input type="checkbox"/> Planning, Land & Water Use Management | <input checked="" type="checkbox"/> Other: (indicate below)
Taxation |
| Ecology, Energy
Environmental Protection | <input type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | |

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

Anne J. Horwath Bell

(Signature of Lobbyist)

11/3/07

(Date)

PART V AUTHORIZATION TO LOBBY

NAME

Paul W. Hallman

TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED

President (MultiState Associates Inc.)

NAME OF ORGANIZATION (if applicable)

MultiState Associates on behalf of U.S. Smokeless Tobacco Co.

TELEPHONE

703-684-1110

MAILING ADDRESS (Street)

515 King Street, Suite 300

FAX

703-684-7912

(City)

(State)

(Zip Code)

Alexandria, VA 22314

I hereby authorize the above named person to engage in lobbying activities on behalf of the undersigned.

Paul W. Hallman

(Signature of Authorizing Officer or Person Represented)

12/29/2006

(Date)